PLEASE PRINT

### STATE OF NEW HAMPSHIRE

### 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 30 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobb	yist(s) <u>Douglas L. Patch</u>	<u> </u>		
II. Name of lobby	yist's partnership, firm or c	orporation, if a	ny:	
Orr & Reno, 1	P.A.			
	(Name of partnership, firm or co	rporation)		
	reet, P.O. Box 3550	Concord	NH	03302
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
(603) <u>224-238</u> (Telepho		224-2318 (Fax		@orr-reno.com
III. This statement reportable expen	nt covers: (Choose one – file se transactions which are n	e separate repoi ot attributable	rts for each client, OR you n to any one client).	nay file a separate report for
☒ All reportable	transactions occurring in the	months prior to	the reporting date relative to t	the following client:
,	il Energy Supply Associ (Full Name of Client as it	ation, Inc.) appears on the Lo	bbyist Registration Form)	
OR All reportable to unrelated to any parts.		ncluding the lob	byist's family), or the lobbyir	ng firm listed below which are
IV. Date of Reports cover:	rt April 25, 2018 🛚	to 3/31/18	July 25, 2018	8
	October 31, 2018 activity from 7/1/18 to 9/30.	/18	January 30, 2019 activity from 10/1/18 to 12/3	1/18
	ed, complete just this form ar		transactions made since the Secretary of State's Office,	
VI. Check if addi	tional reports are attached:			
	•		ile Addendum A- Fees and I	Expenses
☐ If you have pa Expense Reimburs		sed expenses, yo	ou must file <b>Addendum B</b> – R	eport of Honorariums or
☐ If you, your fi	rm, or your family has made	political contrib	utions, you must file Addend	um C- Political Contributions
I have read RSA 1	/Affirmation by Lobbyist 5, RSA 15-B, RSA 14-C and e best of myknowledge and l	RSA 664 and ho		foregoing information is true
(Signature of lob)	ovist)		<u>04/25/18</u> (Da	ate)
V				,
Douglas L. Pat (Print Name of lo	tchbbyist)			

#### L E A S E P R I N

## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Douglas L. Patch	*****			
II. Name of lobbyist's partnership, firm or corporation, if any:				
Orr & Reno, P.A.  (Name of partnership, firm or corporation)				
III. Name of Client RESA (Retail Energy Supply Association, Inc.) Date 04/25/18				
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or p	ublic relations servic		
a) Total of all fees received in this reporting period	a) \$	14,000.00		
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ ear)	0.00		
c) Total of all fees received to date (Add lines a and b)	c) \$	14,000.00		
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00		
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repeating purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if ex may be filed for e aggregate tot xpenses; (b) the ele: meals purch ess than \$10 that ed with a value orting period of ue of greater the er than \$25, but s, expense reim	penditures are made for the lobbyist(s)/fir al of all expenses page aggregate total of mased during a busine to it is given to the persecof \$25.00 or less); a greater than \$25.00 than \$25, purchase of the not greater than \$35 thursement, or political to the political political statement and the political statement is the political statement and the political statement is the political statement in the political statement in the political statement is the political statement i		
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	50.00		
b) Total aggregate of expenditures during this reporting period , not reported in a), of \$25 or less.	b) \$	0.00		
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00		

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	50.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	50.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees dur	ring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foreg	going information
	04/25/18	
(Signature of Lobbyist)	(Date	e)
Douglas L. Patch		
(Print Name of lobbyist)		

# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Statement/Affirmation by Lobbyist
Statem	ent of Income and Expenses for:

Name of Lobbying partnership, firm, or corporatio	n: Orr & Reno, P.A.
	partnership, firm, or corporation and not related to any
particular client): <u>RESA (Retail Energy Suppl</u> y	
Date of Report (check one):	
April 25, 2018 ☑ July 25, 2018 □ O	tober 31, 2018 □ January 30, 2019 □
	atement of Income and Expenses described above, and atement (insert the number of Addendum forms being
1 Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing inform complete to the best of my knowledge and belief.	ation on the Statement and each Addendum is true and $04/25/18$
(Signature of lobyist)	(Date)
V	
Douglas L. Patch	_
(Print Name of lobbyist)	